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Florida Department of State
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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : CSH SERVICES, LLC
Account Number : I20070000160
Phone : (800)494-3124
Fax Number : (561)455-9885

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
MCMY MCNAIR CONSTRUCTION, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

MCMY MCNAIR CONSTRUCTION, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1759 W 43RD STREET
JACKSONVILLE, FLORIDA 32209

ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

1,500 COMMON SHARES PAR VALUE \$0.01

ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)

The name(s), address(es), and title(s) of the directors and/or officers is/are:

DIRECTOR, PRESIDENT
LARRY MCNAIR
1759 W 43RD STREET
JACKSONVILLE, FLORIDA 32209

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PAGE 2 MCMY MCNAIR CONSTRUCTION, INC.

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

LARRY MCNAIR
1759 W 43RD STREET
JACKSONVILLE, FLORIDA 32209

ARTICLE VII INCORPORATOR

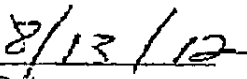
The name and street address of the incorporator is:

LARRY MCNAIR
1759 W 43RD STREET
JACKSONVILLE, FLORIDA 32209


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Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.


LARRY MCNAIR / Registered Agent


Date


LARRY MCNAIR / Incorporator


Date

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